

## **Application Data Sheet**

### **Application Information**

Application number:: n/a  
Filing Date:: 10/31/01  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of copies of CDs::  
Sequence submission?::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: Non-Conformance Monitoring And Control  
Techniques For An Implantable Medical Device  
Attorney Docket Number:: 11738.00045  
Request for Early Publication?:: NO  
Request for Non-Publication?:: NO  
Suggested Drawing Figure::  
Total Drawing Sheets:: 10  
Small Entity?:: NO  
Latin name::  
Variety denomination name::  
Petition included?:: NO  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: NO

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## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: U.S.A.  
Status:: Full Capacity  
Given Name:: Jerome  
Middle Name:: T.  
Family Name:: Hartlaub  
Name Suffix::  
City of Residence:: St. Paul  
State or Province of Residence:: Minnesota  
Country of Residence:: U.S.A.  
Street of mailing address:: 2133 Erin Court  
City of mailing address:: St. Paul  
State or Province of mailing address:: Minnesota  
Country of mailing address:: U.S.A.  
Postal or Zip Code of mailing address:: 55112

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::

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State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

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Country of Residence::  
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City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

### Correspondence Information

Correspondence Customer Number:: 22908

### Representative Information

Representative Customer Number:: 22908

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/259,008	12/29/00


### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name:: Medtronic, Inc.  
 Street of mailing address:: 710 Medtronic Parkway  
 City of mailing address:: Minneapolis  
 State or Province of mailing address:: Minnesota  
 Country of mailing address:: U.S.A.  
 Postal or Zip Code of mailing address:: 55432-5604

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